

Arlington Council on Aging
27 Maple Street
Arlington, MA 02476
781-316-3400



Application for Veterans' Tax Work Off Program

Date _____ Fiscal Year _____

Name of applicant _____

Address _____

Home Phone _____ Cell Phone _____

Email _____ DOB _____

Eligibility and Guidelines: Answers are confidential. Applicants meeting eligibility requirements will be considered for placement in participating departments. Residents must reapply annually. Verification is required

- Applicant must be an honorably or medically discharged veteran and provide a certification of veteran's status (DD214)
- 5 spots are designated for Veterans
- Abatement up to \$1,000 annually per Veteran, must work up to 91 hours
- One year residency in Arlington requirement
- Applicant name must be on the deed
- One Veteran tax work-off abatement participant per household
- W-4 and CORI (Criminal Offender Record Information) forms are part of the application (a copy of a picture ID is required for the CORI)

Do you own and occupy the property for which Arlington taxes are paid ? _____ yes _____ no

Is the deed in the applicant's name? _____ yes _____ no

Are there any unusual or extraordinary needs or expenses? _____

Please describe any training or job related skills that will help us evaluate your application for this program (i.e. computer skills, accounting, office , data entry, etc.)

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_____ Town Hall _____ COA _____ Schools _____ Police _____ Library
_____ Fire _____ DPW _____ Recreation Other: _____

Signature _____ Date: _____

Referral to: _____ Date: _____

Interview Date: _____ Start Date: _____

Department Supervisor: _____ COA Signature: _____